



FORM/REQUEST ACCREDITATION OF PREVIOUS TRAINING AND PROFESSIONAL EXPERIENCE (Order RT-03/2020 of 03 January, Articles 24 and 25)	Registration: _____ Received on: ____/____/____ By: _____
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Full name: _____ Degree: _____ Student Number: _____

Request for:
▪ Accreditation of training completed in the cycle of studies/degree in _____ in the institution _____, supported by the documents:
Certificate with the final grade of the degree if already holding a higher education degree <input type="checkbox"/>
Academic certificate of completed course units <input type="checkbox"/>
Certificate of the syllabus and load of completed course units <input type="checkbox"/>
None of the aforementioned documents if the course units were completed at the University of Minho <input type="checkbox"/>
Other (specify) _____ <input type="checkbox"/>
▪ Accreditation of extracurricular course units completed at the University of Minho <input type="checkbox"/>
▪ Accreditation of specific course units completed at the University of Minho <input type="checkbox"/>
▪ Accreditation of duly proven professional experience, supported by the documents:
A document identifying the activity that describes the content, duration and conditions of the work experience completed <input type="checkbox"/>
Certificate from the employer that attests to that information <input type="checkbox"/>
Other (specify) _____ <input type="checkbox"/>

I hereby acknowledge the conditions described in Articles 24 and 25 of the Order RT-03/2020 of 03 January, which approves the Academic Regulation. University of Minho, _____ Signature: _____
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Note: A notification will be sent via Electronic Desk in the Academic Portal upon a decision on this request.